

OPERATIONAL MEMO

TITLE:	CASE MANAGEMENT ADDITIONAL OPERATIONAL CHANGES IN RESPONSE TO COVID-19
SUPERSEDES NUMBER:	N/A
EFFECTIVE DATE:	MARCH 13, 2020
DIVISION AND OFFICE:	CASE MANAGEMENT AND QUALITY PERFORMANCE DIVISION, OFFICE OF COMMUNITY LIVING
PROGRAM AREA:	CASE MANAGEMENT AGENCIES
KEY WORDS:	COVID-19, CORONAVIRUS, CASE MANAGEMENT, MONITORING, FUNCTIONAL ELIGIBILITY ASSESSMENT, LEVEL OF CARE, CSR, ULTC 100.2, 803
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APPROVED BY: BONNIE SILVA	

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Purpose and Audience:

The purpose of this Operational Memo is to inform Case Management Agencies (CMAs) of temporary operational changes to case management requirements for members' functional eligibility paperwork.

Information:

The Department is working with the Centers for Medicare and Medicaid Services (CMS) on temporary changes to Case Management operations regarding the COVID-19 presence in Colorado. Effective March 13, 2020, the Department is extending the amount of time a Case Manager has to obtain the forms required for all eligibility assessments. The case manager now has up to 60 days after the assessment and/or Service Plan start date to obtain the following completed forms:

- Professional Medical Information Page
- Statement of Agreement

- Consumer Directed Attendant Support Services Physician Attestation of Consumer Capability
- Children's Extensive Supports (CES) Application Signature Page
- Physician Attestation of Life Limiting Illness Form
- Family Support Services Program (FSSP) Service Plan
- State Supported Living Services Program Service Plan
- In Home Support Services Physician Attestation
- Physician Documentation for Children's Habilitation Residential Program Eligibility

This includes the physical forms required for the following programs:

- Home and Community Based Service (HCBS) Waivers
- Nursing Facility (NF)
- Program of All-Inclusive Care for the Elderly (PACE)
- Hospital Back Up (HBU)
- Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)
- Long Term Home Health (LTHH)
- Targeted Case Management
- Colorado Choice Transitions (CCT)
- State General Fund Programs (SGF), Family Support Services Program (FSSP), State Supported Living Services (SLS) and Ombudsman Reconciliation Act (OBRA)

Members are allowed to establish and continue eligibility for up to 60 days following their program start date while the case manager is working to obtain the required forms by mail or electronic methods. Service may begin or continue during this 60 day period. Case Managers are to work collaboratively with the member to obtain the required forms within the enhanced timeline. If the case manager is unable to obtain the required forms after 60 days, or if the form indicates targeting criteria or eligibility is not met, the case manager will notify the member using the 803 notice of adverse action and outreach the member to work on coordination of other supports for the member.

Questions regarding this guidance can be sent to <u>HCPF_HCBS_Questions@state.co.us</u>

Attachment(s):

None

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